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		(Column		(Colun	nn 2)		TYPE [ÓR	OTHER SMALL	
TOTAL CLAIMS			•			1	RATE	FEE	1	RATE	FEE
FOR		NUMBER	FILED	NUMBE	R EXTRA		BASIC FEE	4 23	OR	BASIC FEE	891
TOTAL CHARGEA	BLE CLAIMS	(a mi	nus 20=	•			'X\$ 9=		OR	X\$18=	
INDEPENDENT CL	AIMS	√ m	inus 3 =	*	٠.		X42=		OR	X84=	
MULTIPLE DEPEN	IDENT CLAIM P	RESENT							.		
* If the difference	in column 1 is	less than z	ero, enter	"0" in co	olumn 2	' I	+140=		OR	+280=	(70)
	LAIMS AS A						TOTAL		OR	TOTAL	341
×	(Column 1)	MENDE	Colum)		(Column 3)		SMALL	ENTITY	OR	OTHER SMALL	
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Total Total	• 13	Minus	** 3	0	=] [X\$ 9=		OR	X\$18=	
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FIRST, PRESE	NTATION OF M	ULTIPLE DE	PENDENT	CLAIM .]					\ \frac{1}{1}
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MENTO	CLAIMS		HIGH	BER DUSLY		•	TOTAL	ADDI: TIONAL FEE		TOTAL	
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.Total Independent	CLAIMS REMAINING AFTER AMENDMENT	Minus	HIGH NUM PREVK PAID	BER DUSLY FOR	PRESENT EXTRA	•	TOTAL ADDIT, FEE	TIONAL	OR	TOTAL ADDIT. FEE	ADDI-
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